# ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY

W-02386A

Sun Leisure Estates Utilities Co., Inc. PO Box 1074 Yuma, AZ 85366



# ANNUAL REPORT Water

FOR YEAR ENDING

12 31 2010

FOR COMMISSION USE

ANN 04 10

4-4-11

#### **COMPANY INFORMATION**

Company Name (Business Name) 5	un Leisure Estates	Utilities	Co. FNC.
Mailing Address P.o. Box 10 (Street)	74		·
(Street)		~~	- A .
<u> Yuma</u> (City)	AZ	85	366
(City)	(State)	(Zip)	
928-344-4050 Telephone No. (Include Area Code)	928-344-4053		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include A	Area Code)
Email Address			
Local Office Mailing Address			
(St	reet)		
(City)	(State)	(Zip)	
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include /	Area Code)
Email Address			
MANA	GEMENT INFORMATION		
☐Regulatory Contact:			
Management Contact: DIAJA  255 W. 24 St. Suite (Street)	Crities	Office	MANAGER
<b>-</b> 4	(Name)	(Title)	· ·
255 Wize St. Suite	2 Yuna	AZ	85364
(Street)	(City)	(State)	(Zip)
928-344-4050	928.344-4053		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include A	rea Code)
Email Address dianacay	luna. twobc. Com		
2.2			
On Site Manager: N/A	(Name)		
,	(maine)		
(Street)	(City)	(State)	(Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include A	rea Code)
Email Address			

Statutory Agent: DIANA (	e, tes				
Statutory Agent: DIANA (  2-55 W, Z4 th 57. Sight  (Street)	e 2 Yuma	AZ 85360	<u>+</u>		
	(City)	(State) (Zip)			
G28-344-4050 Telephone No. (Include Area Code)	928-344-405 Fax No. (Include Area Code	Cell No. (Include Area Code)			
1405 W. 16 ST. # (Street)  928. 343-9447  Telephone No. (Include Area Code)	(Name)				
1405 W. 16th ST. #	A YUMA	AZ 85364	<i>t</i>		
(Street) G18. 2.12. 91147	(City) 978.242.940	(State) (Zip)			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)			
Email Address		· · · · · · · · · · · · · · · · · · ·			
<u>ow</u>	NERSHIP INFORMATIO	<u>ON</u>			
Check the following box that applies to y	our company:				
Sole Proprietor (S)	∠ C Corporation (C) (Other than Association/Co-op)				
Partnership (P)	☐ Subchapter S Corporation (Z)				
Bankruptcy (B)	Association/Co-op (A)				
Receivership (R)	Limited Liability	Company			
Other (Describe)					
	COUNTIES SERVED				
Check the box below for the county/ies in	n which you are certificated to pro	ovide service:			
<b>П</b> АРАСНЕ	☐ COCHISE	☐ COCONINO			
☐ GILA	☐ GRAHAM	☐ GREENLEE			
☐ LA PAZ	☐ MARICOPA	☐ MOHAVE	;		
☐ NAVAJO	☐ PIMA	☐ PINAL			
☐ SANTA CRUZ	☐ YAVAPAI	X YUMA			
☐ STATEWIDE					

# COMPANY NAME SUN LEISURE ESTATES UTILITIES GO. INC.

#### **UTILITY PLANT IN SERVICE**

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	5,000	NA	5,000
304	Structures and Improvements	3,437	3092	345
307	Wells and Springs	24.490	12,109	12,381
311	Pumping Equipment	20.654	19.590	1064
320	Water Treatment Equipment	NA	NA	NA
330	Distribution Reservoirs and Standpipes	12,231	11,329	902
331	Transmission and Distribution Mains	19, 293	19,293	0
333	Services	5, 194	5, 194	0
334	Meters and Meter Installations	1.339	1. 339	0
335	Hydrants	2.712	2,712	0
336	Backflow Prevention Devices	ENCINARED IN	,	
339	Other Plant and Misc. Equipment	NA	NA	NA
340	Office Furniture and Equipment	1,206	1,206	0
341	Transportation Equipment	NIA	NIA	NA
343	Tools, Shop and Garage Equipment	NA	NA	MA
344	Laboratory Equipment	MA	MA	NA
345	Power Operated Equipment	NA	NA	NA
346	Communication Equipment	NA	NA	NA
347	Miscellaneous Equipment	N/A	NA	MA
348	Other Tangible Plant	NA	NIA	N/A
	TOTALS	95,556	75,864	19,692

This amount goes on the Balance Sheet Acct. No. 108-

## COMPANY NAME SUD CEISURE ESTATES UTILITIES GO. FUC.

#### **CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation  Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	665	3.93	39
307	Wells and Springs	665 18,572 4,750	3.33	619.
311	Pumping Equipment	4750	3.33	594
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	3090	5,00	154
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	21,017		1406.

This amount goes on the Comparative Statement of Income and Expense \_ Acct. No. 403.

### COMPANY NAME SUN LESKEE CSTATES UTILITIES CO. INC

#### **BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
.,	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 2984	\$ 24,159
134	Working Funds	7,	
135	Temporary Cash Investments		
141	Customer Accounts Receivable	988	361
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 3,972	\$ 24,520
	FIXED ASSETS		
101	Utility Plant in Service	\$ 95, 556	\$ 95.55%
103	Property Held for Future Use	<del>                                     </del>	12,000
105	Construction Work in Progress		3,550
108	Accumulated Depreciation – Utility Plant	74,458	3,550 75,864
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 21, 098	\$ 23,242
	TOTAL ASSETS	\$ 25,070	\$ 47,762

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

### COMPANY NAME SUN Leisure Estates Utilities Co. INC.

#### **BALANCE SHEET (CONTINUED)**

Acet. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
·	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		4710
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits	550	550
236	Accrued Taxes	2,4	340
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities	764	2383
	TOTAL CURRENT LIABILITIES	\$ 1528	\$ 7983
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$ 19,183
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction	57.826	57,826
272	Less: Amortization of Contributions		,
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$ 37,826	\$ 57,826
	TOTAL LIABILITIES	\$ 59.354	\$ 84,992
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		1
215	Retained Earnings	(34.284)	1 C37:320
218	Proprietary Capital (Sole Props and Partnerships)	(34,284)	
	TOTAL CAPITAL	\$ <37,284	\$ (31,328)
,	TOTAL LIABILITIES AND CAPITAL	s 25,070	\$ 47,762

## COMPANY NAME SUN Leisure Estates utilities Co. INC.

#### **COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 13.142	\$ 14.885
460	Unmetered Water Revenue	NA	NA
474	Other Water Revenues	MA	NA
	TOTAL REVENUES	\$ 13.142	\$ 14,885
	OPERATING EXPENSES		
601	Salaries and Wages	\$ NA	\$ NA
610	Purchased Water	NA	NA
615	Purchased Power	1577	1455
618	Chemicals	NA	NA
620	Repairs and Maintenance	186	250
621	Office Supplies and Expense	420	243
630	Outside Services	7640	7900
635	Water Testing	2360	2549
641	Rents	NA	NA
650	Transportation Expenses	NIA	MA
657	Insurance – General Liability	1900	1180
659	Insurance - Health and Life	MA	NA
666	Regulatory Commission Expense – Rate Case	NA	
675	Miscellaneous Expense	186	595
403	Depreciation Expense	1389	1406
408	Taxes Other Than Income	NA	1427
408.11	Property Taxes	499	473
409	Income Tax	45	45
·	TOTAL OPERATING EXPENSES	\$ 16202	\$ 17,523
	OPERATING INCOME/(LOSS)	\$ <30607	\$ < 26387
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income	171	
426	Miscellaneous Non-Utility Expenses	, , ,	
427	Interest Expense		23087
	TOTAL OTHER INCOME/(EXPENSE)	\$ 171	\$ < 308>
	NET INCOME/(LOSS)	\$ < 2889 >	\$ 1 29467

### COMPANY NAME SUN LEISURE ESTATES UTILITIES CO. FIX

#### SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	09-02-2010 PRIVATE			
Source of Loan	PRIVATE			
ACC Decision No.	71831			
Reason for Loan	7/83/ Peill New BACK up Okl) \$ 25,000 \$ 23,892.56 09/15/2015			
Dollar Amount Issued	\$ 25,000	\$	\$	\$
Amount Outstanding	\$ 23,892.56	\$	\$	\$
Date of Maturity	09/15/2015			
Interest Rate	5 %	%	%	%
Current Year Interest	\$ 307.90	\$	\$	\$
Current Year Principle	\$ 307.90 \$ 1,107.44	\$	\$	\$

Meter Deposit Balance at Test Year End	\$ 550	
Meter Deposits Refunded During the Test Year	\$ 0	

COMPANY NAME SUN LEISURE	Estates Utilities C	o. Fuc
Name of System: SA me	ADEQ Public Water System Number:	14075

#### WATER COMPANY PLANT DESCRIPTION

#### **WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-584795	7,5	130	260	8"	1"	2001

<sup>\*</sup> Arizona Department of Water Resources Identification Number

#### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
NA	NA	NA
		,

BOOSTER PUN	BOOSTER PUMPS		DRANTS
Horsepower	Quantity	Quantity Standard	Quantity Other
7.5	2	3	N/A

STORAGE TANKS		PRESSURE TANKS		
Capacity	Quantity	Capacity	Quantity	
15,000 galleds	1	1000 GAL	/	
7		71		

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	SUN Leisur	e Estates U	tihities	Co. IN	C,
Name of System:	SAME	ADEQ Public Water	r System Number:	140	75

#### WATER COMPANY PLANT DESCRIPTION (CONTINUED)

#### **MAINS**

Size (in inches)	Material	Length (in feet)
2	Puc	220'
3		
4	PUC	312
5		
6	Puc	1700'
8		
10		
12		

#### **CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	57
3/4	N/A
1	N/A-
1 1/2	Nin
2	NA
Comp. 3	NIA
Turbo 3	NIA
Comp. 4	NIA
Turbo 4	NIA
Comp. 6	A)/A
Turbo 6	NA

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:	NA	
STRUCTURES:	NA	
OTHER:	NA	

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	SUN	LRISURE	EstAtes	UTILITIES	Co.	trac
Name of System:	SAV	ne AI	DEQ Public Wate	er System Number:		4075

#### WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010

MONTH	NUMBER OF	GALLONS	GALLONS	GALLONS
	CUSTOMERS	SOLD	PUMPED	PURCHASED
		(Thousands)	(Thousands)	(Thousands)
JANUARY	57	241.880	258,600	MA
FEBRUARY	57	252, 480	269 680	MA
MARCH	57	266, 580	280 440	NA
APRIL	57	269, 530	297, 420	NA
MAY	57	247.850	244 640	UA
JUNE	57	261. 740	268,200	N/ 17
JULY	57	299,770	307 220	NA
AUGUST	57	272,630	288, 230	MA
SEPTEMBER	57	251.488	254,920	NIA
OCTOBER	57	205 850	214.710	NA
NOVEMBER	57	218, 190	228, 430	NIA
DECEMBER	57	2,9, 330	229 760	NA
	$TOTALS \longrightarrow$	3,007,318	3,142,250	Na

What is the level of arsenic for each well on your system? mg/l (If more than one well, please list each separately.)
If system has fire hydrants, what is the fire flow requirement? <u>500</u> GPM for <u>&gt;</u> hrs
If system has chlorination treatment, does this treatment system chlorinate continuously?  ( ) Yes ( ) No NA
Is the Water Utility located in an ADWR Active Management Area (AMA)?  ( ) Yes ( No
Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  ( ) Yes   ( No
If yes, provide the GPCPD amount:

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME: 54	V Leisure Estates	UtiLities	Co. Inc
Name of System: 54		ater System Number:	14075

#### **UTILITY SHUTOFFS / DISCONNECTS**

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
$TOTALS \rightarrow$			

OTHER (description):	None	 2010	
			,

# COMPANY NAME SUN LESURE ESTATES UTILITIES COYEAR ENDING 12/31/2010

#### **PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2010 was: \$	472.84
Attach to this annual report proof (e.g. property tax bills stamped "paid in ful property tax payments) of any and all property taxes paid during the calendar	
If no property taxes paid, explain why.	

#### VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED	
ACC UTILITIES DIRECTOR	-
( ) TOD	

VERIFICATION

STATE OF AZ

I, THE UNDERSIGNED

OF THE

			-,,,,	$m_{\mathcal{ES}_{Dip}}$
COUNTY OF (COUNTY NAME)	Yuma	, ^		THO
SUN L'OWNER OR	CHOTOS	Utility	Co.	TAC
COMPANY NAME	wy5QX	d. Pre	Sidert	t.
	7.7	•		

<u>DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION</u>

FOR THE YEAR ENDING

MONTH	DAY	YEAR
1:2	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

SIGNATURE OF OWNER OF OFFICIAL

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS THIS

DAY OF

COUNTY NAME YU

20[]

(SEAL)

MY COMMISSION EXPIRES JUVE. 8, 3013

SIGNATURE OF NOTARY PUBLIC



# COMPANY NAME SIN WEISKRE ESTATES UT, L, Ties COST NE YEAR ENDING 12/31/2010

#### **INCOME TAXES**

For this reporting period, provide the followin	•	41 . C. 1		1		41	$\mathbf{r}$
	wing:	the fol	provide ti	perioa.	reporting	or unis	r

Federal Taxable Income Reported	-15.00
Estimated or Actual Federal Tax Liability	0.00
State Taxable Income Reported Estimated or Actual State Tax Liability	-30.00 45.00

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances	<u>51826</u>
Amount of Gross-Up Tax Collected	
Total Grossed-Up Contributions/Advances	57826

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

#### **CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

IGNATURE 3-30-39
DATE

CHUCIC SWYSGOOD PRINTED NAME TITLE

## VERIFICATION AND

RECEIVED	,
ACC UTILITYES DIRECTOR	, A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
DIRECTOR	

SWORN STATEMENT **Intrastate Revenues Only** VERIFICATION COUNTY OF (COUNTY NAME) STATE OF AZ NAME (OWNER OR OFFICIAL) TITLE I. THE UNDERSIGNED OF THE DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION MONTH DAY YEAR FOR THE YEAR ENDING 12 31 2010 HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. **SWORN STATEMENT** IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE **UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:** Arizona Intrastate Gross Operating Revenues Only (\$) · 16029-(THE AMOUNT IN BOX ABOVE INCLUDES \$ 1145 -IN SALES TAXES BILLED, OR COLLECTED)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE **DIFFERENCE. (EXPLAIN IN DETAIL)** 

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

20

DAY OF

(SEAL)

TELEPHONE NUMBER COUNTY NAME

20 W 4QNTH

# VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE Intrastate Revenues Only



VERIFICATION

STATE OF ARIZONA	COUNTY OF (COUNTY NAME)	
I. THE UNDERSIGNED	NAME (OWNER OR OFFICIAL)	TITLE

OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:</u>

RIZONA INTRASTATE GROSS OPERATING REVENUES  S 1 (0) 20 - IN SALES TAXES BILLED, OR COL
--

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SIENTE OF OWNER OR OFFICIAL

928 - 317 - 9379

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS



DAY OF

MONTH MANCH

.20

(SEAL)

MY COMMISSION EXPIRES

June 8, 2015

SIGNATURE OF NOTARY PUBLIC